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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)


Total Number of Pages in This Submission

Application Number	08/902,692
Filing Date	07/30/1997
First Named Inventor	William J. Rea
Art Unit	1644
Examiner Name	Ron Schwadron, Ph.D.
Attorney Docket Number	EHCD16715CIP

**ENCLOSURES (Check all that apply)**

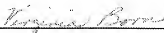
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Crutsinger & Booth, LLC		
Signature			
Printed name	Todd E. Albanesi		
Date	July 27, 2007	Reg. No.	36,426

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature		
Typed or printed name	Virginia Born	Date July 27, 2007

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PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number EHCD16715CPA2	
APPLICATION AS FILED – PART I						OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))	N/A	N/A	N/A		N/A		
SEARCH FEE (37 CFR 1.16(a), (d), or (e))	N/A	N/A	N/A		N/A		
EXAMINATION FEE (37 CFR 1.16(a), (d), or (e))	N/A	N/A	N/A		N/A		
TOTAL CLAIMS (37 CFR 1.16(f))	minus 20 =	*	X =		X =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	X =		X =		
APPLICATION SIZE FEE (37 CFR 1.16(g))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))			N/A		N/A		
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL		TOTAL		
APPLICATION AS AMENDED – PART II						OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
Total (37 CFR 1.16(j))	* Minus **	**	=	X =		X =	
Independent (37 CFR 1.16(k))	* Minus ***	***	=	X =		X =	
Application Size Fee (37 CFR 1.16(g))							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i))			N/A		N/A		
			TOTAL ADD'L FEE		TOTAL ADD'L FEE		
(Column 1)		(Column 2)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
Total (37 CFR 1.16(j))	* 17 Minus **	66	= 0	X =		X =	
Independent (37 CFR 1.16(k))	* 3 Minus ***	3	= 0	X =		X =	
Application Size Fee (37 CFR 1.16(g))							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i))			N/A		N/A		
			TOTAL ADD'L FEE		TOTAL ADD'L FEE		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22315-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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